

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
1	SAQMMA11-R-0010, RESPONSE TO INDUSTRY QUESTIONS AND COMMENTS, REQUEST FOR PROPOSAL DATED				
2	FEBRUARY 11, 2011				
3					
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
5					
6	H.9, "Licenses, Bonds and Permits" states, "The Contractor shall provide and pay for any official bonds and/or licenses required for the performance of this contract." Because there is no construction, please confirm that no bond (bid bond, performance bond, payment bond, or bonding of any individuals) is required.	H.9 pg 38	This is not a construction contract.	CGR	2/22/2011
7	The Government notes that task orders will be FFP where possible, but notes that cost-reimbursable type contracts may be used. Please clarify whether the Government intends to use CPAF contracts and would provide an Award Fee Plan.	B.2 pg 7	There will be no CPAF, either at the basic contract level or at the task order level.	CGR	2/22/2011
8	The contract mentions reimbursable materials and places some controls on non-expendable materials. Will the contractor have to provide expendable materials, medical supplies, or pharmaceuticals as part of the FFP?	B.3.1 pg 7-8	The Offeror is to propose a supply chain that meets the requirements of the contract.	CGR	2/22/2011
9	B.2 specifies the ID/IQ minimum to be \$100K and the maximum to be \$1B. Is there a minimum or maximum order limit for any single task order?	B.2 pg 7	No.	CGR	2/22/2011
10	E.7 seems to be aimed at deliverable reports or data items. E.8 repeats language from E.7. Is E.8 to be applied to all non-data item type deliverables including services, materials, or other work under the contract?	E.7 and E.8 pg 24	No. E.8. has been deleted.	CGR	2/22/2011

EXHIBIT**4**

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4	A	B	C	D	E
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11	F.1 states the contractor will accommodate transition of 90 days. Will transition be part of the first one-year period of performance starting May 20, 2011, as indicated in CLIN 001; such that full contract performance starts August 21, 2011?	F.1 pg 25	Transition has been added to Task Order 001--Program Management. Transition will extend from May 20, 2011 to September 1, 2011.	CGR	2/28/2011
12	Will transition be a separate CLIN?	Section B, 2 of 9, Amd 0001	Yes, under Task Order 001.	CGR	2/28/2011
13	Because services will be provided on a continuous basis across a 12-month period, how will the Late Delivery clause be used with respect to delivery of services? Does the notice provision apply only to materials or data to be delivered under the contract?	F.6 pg 25-26	a. F.6. has been corrected to read, "...Such notification in no way limits the government's right to any and all rights and remedies under the contract." b. This provision applies to all deliverables under the contract.	CGR	2/28/2011
14	G.3 specifies what each invoice must contain; however, it does not require signature or other evidence of acceptance by the Government. G.4 specifies the responsibilities of the COR to include inspection and acceptance. Will the COR have to provide evidence of acceptance for any FFP, Labor Hour, or T&M work as well as acceptance of any material, travel, ODCs, or other work as described in any CLIN for the contractor to invoice and get paid?	G.3 and G.4.2(8) pg 28-31	Payment and Inspection/Acceptance are two separate functions.	CGR	2/28/2011
15	The invoicing instructions for non-fee bearing cost reimbursable (CR) CLINS including travel and ODCs only allow the contractor to invoice monthly. However, FAR 52.216-7 "Allowable Cost and Payment" allows the contractor to invoice every two weeks for CR items. Request the contractor be allowed to invoice every two weeks in accordance with the FAR clause to avoid a deviation.	G.5.2, G.5.3 and G.5.4 pg 31-32	G.5.4.--"monthly" has been deleted.	CGR	2/28/2011

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16	H.1 requires contractors to wear ID cards on their "uniforms". Please define what uniforms are required for contractor personnel.	H.1 Security pg 33	Generally medical staff wear scrubs or other easily cleaned clothing. There is no requirement for an identifiable uniform.	HHP	3/2/2011
17	H.1.1 lists countries from which no person may work on the contract in any capacity. Does the term "any capacity" preclude the contractor from assigning work to any person from these countries who have the legal right to work in the U.S. performing "back office" (e.g., Accounting & Finance, Human Resources)? Does this clause only prohibit the contractor from assigning work in Iraq to persons from these countries?	H.1.1 pg 33	The Government of Iraq is setting restriction regarding country of origin. This requirement restates that requirement/restriction. To the extent that we can determine the intent of the GOI, working in Iraq means any employee or person performing more than 30 days in Iraq. Experience shows that interpretation is often performed by the individual by the inspector on site on the given day. Therefore, until more specific definition is provided, it would be wise for the contractor to not incur cost to provide an employee that may not be acceptable to the GOI.	HHP	3/2/2011
18	H.1.2 and H.1.3 specify that individuals will need security clearances; and, information security requirements. Will the Government include a security specification or DD 254 with the solicitation or contract?	H.1.2 and H.1.3 pg 33-35	Neither provision requires a Secret or Top Secret clearance. This contract is at the Moderate Risk Public Trust (MRPT) level.	CGR	2/22/2011
19	H.2 requires Government approval of all Contractor employees. Please clarify whether this clause applies to contractor employees located in the United States performing "back office" type jobs such as Accounting & Finance, Human Resources, etc.; or whether this clause only applies to contractor employees assigned in Iraq directly working on the contract.	H.2 pg 35-37	H.2. refers to contractor's employees serving in Iraq for the Chief of Mission. H.2. has been amended to add, "in Iraq."	HHP/CGR	3/2/2011
20	H.5 implements requirements from FAR 52.225-19. However, FAR 52.225-19 is not in the contract. Please clarify the RFP.	H.5 pg 37	FAR 52.225-19 has been added to Sec. I.	CGR	2/22/2011

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21	H.9 requires the contractor to obtain all permits. Will the contractor have to supply pharmaceuticals from the U.S. or pharmaceuticals of U.S. origin under the contract? If so, will the contractor have to obtain the required FDA permits for each export?	H.9 pg 38	The Offeror is to propose a supply chain that meets the requirements of the contract. Pharmaceuticals can be either FDA or European Medicine Agency Approved, but do not have to come from the U.S. and no FDA export permits are required.	CGR/BAT	2/22/2011
22	H.11 requires the contractor to carry insurance as listed in the clause. Section I contains FAR 52.228-5 Insurance - Work on a Government Installation (Jan 1997). However, the contract only requires medical malpractice insurance. Are other types of insurance coverage required for this contract?	H.11 and FAR 52.228-5 pp 39 and 50	See FAR 52.228-5(a).	CGR	2/22/2011
23	Section I contains FAR 52.237-7 Indemnification and Medical Liability Insurance (Jan 1997). However, the clause requires the Government to state the amount of insurance per specialty per occurrence. The implementation of the clause is not in the contract. Please specify the amount of medical liability insurance the contractor is to carry.	H.11 and FAR 52.237-7 pp 39 and 51	The RFP has been amended to include the following: a) Malpractice Insurance—for non-surgeon doctors, nurse practitioners, and physicians assistants, \$1 million/ \$3 million (per occurrence/total).	BAT, MJC	2/23/2011
24	H.12.2 does not allow the contractor to add G&A to DBA insurance. Since DBA is an allowable cost and would be part of the contractor's cost base where G&A is applicable, request the Government allow the contractor to add its appropriate OH and G&A in accordance with GAAP, the contractor's CASB Disclosure Statement, and normal business practice as applied to all other US Government contracts.	H.12.2 pg 40	H.12.2 has been amended. Applicable indirect costs are allowable on DBA.	PC	3/3/2011

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25	FAR 52.229-6 Taxes--Foreign Fixed-Price Contracts (June 2003) requires the contractor to include all applicable taxes in the contract. The Agreement for Economic and Technical Cooperation between the Government of the United States and the Government of the Republic of Iraq (the 2005 Assistance Agreement), which provides tax exemption, although signed on behalf of the two governments has not been approved by the Iraqi legislature. Please clarify whether all offerors are to exclude the taxes described in the Agreement in prices proposed?	FAR 52.229-6 pg 51	The Contractor will be responsible to know and follow the laws of Iraq. Since these laws and regulations are being developed, no comprehensive direction can be provided. As changes are codified by the GOI, those changes will be provided to the Contractor.	HHP	3/2/2011
26	If the taxes in The Agreement for Economic and Technical Cooperation between the Government of the United States and the Government of the Republic of Iraq (the 2005 Assistance Agreement), which provides tax exemption, is not approved by the Iraqi legislature at the time of offer and those taxes were excluded in the prices proposed, will the US Government provide an equitable adjustment to the awardee's contract?	FAR 52.229-6 pg 51	The contractor should bid according to the known laws and regulations. Should an adjustment be deemed necessary by the contractor, such request will be heard by the Contracting Officer and adjudicated at that time.	HHP	3/2/2011

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27	The Liquidated Damages (LDS) of \$500 is not clear as to the basis of its application, e.g., per labor hour not delivered, entire month of performance, or what. The dollar amount appears punitive or acts as a negative incentive which violates FAR 11.501(b). Also the application of the clause does not seem to be in accordance with the policy specified in FAR 11.501(a). Therefore, request deletion of the Liquidated Damages clause.	FAR 52.211-11 pg 49	No. It is anticipated that task orders will, at least for labor, be firm fixed price. The Government will not reimburse for manpower not delivered.	CGR	2/22/2011
28	Since the Defense Base Act applies, FAR 52.228-4 is not to be used (See FAR 28.309(b)). Request deletion of FAR 52.228-4 Workers' Compensation and War-Hazard Insurance Overseas (Apr 1984).	FAR 52.228.4 pg 50	52.228-4 has been deleted.	CGR	2/22/2011
29	The clause requires the Contracting Officer to insert the amount of medical liability insurance to be carried by the contractor. Request the amounts be specified in the clause.	FAR 52.237-7 pg 51	The RFP has been amended to include the following: a) Malpractice Insurance—for non-surgeon doctors, nurse practitioners, and physicians assistants, \$1 million/ \$3 million (per occurrence/total).	BAT, MJC	2/23/2011
30	These clauses are for supply contracts. The contract is for services where the use of these clauses is not appropriate. Request deletion of these two clauses.	FAR 52.246-17 and FAR 52.246-18 pg 51	No. ODCs include materiel.	CGR	2/22/2011
31	The use of FAR 52.232-19 does not seem to meet the criteria of FAR 32.705-1(b) as this is not a one-year contract. Request deletion of this clause.	FAR 52.232-19 pg 54	No, the basic contract is for one year.	CGR	2/22/2011
32	The clause titled, "Accounting for Government Property" does not have a clause number. Request a number be assigned.	Section I pg 60	No number has been assigned as of this date.	CGR	2/22/2011

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33	Note 4 under the section on Ceiling Indirect Cost Rates references Section B.5. However, there is no Section B.5.	L.10.1.2.5 82	Pricing instructions have been amended.	OJ	3/7/2011
34	The section on Ceiling Indirect Cost Rates explains how to communicate these rates. However Section B does not require the contractor to include ceiling rates in its pricing. Suggest deleting the concept of negotiating ceiling rates and use the final rates as negotiated between the contractor and its cognizant Government Contract Administration Activity the final rates to determine the final cost incurred on the contract.	L.10.1.2.5 82	Pricing instructions have been amended. Ceiling rates will remain and will be a basis for evaluating cost proposals.	OJ	3/7/2011
35	While there is no requirement to meet or fulfill JCAHO requirements, standards, or accreditations, are there any other Dos, U.S., or Iraqi requirements, standards, or accreditations applicable for the 11 health care sites?	Questions and Answers (11 Feb 2011) #143	There are no specific standards or requirements for the health care facilities beyond what is specified in the RFP. The contractor may utilize some Department of State resources for quality assurance, blood-borne pathogen training, and controlled medication inventory.	MJC	2/28/2011
36	Please provide detailed instructions to complete schedule B.	B Tables, 3	Pricing instructions have been amended.	OJ	3/7/2011
37	1. Why is the Quantity column 0 for each cost element except DBA?		Pricing instructions have been amended.	OJ	3/7/2011
38	2. Is schedule B supposed to demonstrate costs identified in 2-11-2011_Pricing_Tables.xlsx? If the answer is yes please provide detailed instructions.		Pricing instructions have been amended.	OJ	3/7/2011

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39	Document states "The first task order under this contract will be for Program Management." Program management may include employees who are located outside of Iraq. Do you want these positions added to worksheet 4 Fixed Rates in 2-11-2011_Pricing_Tables.xlsx? Would these positions also be included in 2-11-2011_Pricing_Tables.xlsx sheets 6 through 10?	B.2, Type of Contract pg 8	Pricing instructions have been amended. See attachment to Task Order 001.	OJ	3/7/2011
40	Where is Attachment A – Labor Categories? Is this referencing 2-11-2011_Pricing_Tables.xlsx? If it is, what sheet is this reference?	B.3, Labor Categories pg 8	See Attachment A, Amd 0001.	CGR	2/22/2011
41	Is a SOFA in currently in place?	C.2, Background pg 8	(Status of Forces Agreement) No.	CGR	2/22/2011
42	Please clarify where, in the proposal, the Subcontracting Plan should be included.	H.8, DoS Subcontracting Goal pg 38	L.10 has been amended to address the Subcontracting Plan. It will be appended to the Technical Proposal.	CGR	3/2/2011
43	Will each facility in Iraq be required to obtain separate DEA registration as a dispensing (hospital/clinic) facility?	H.9, Licenses, Bonds, and Permits pg 38	If the contractor wants to bring controlled substances from the US, he will have to register as a DEA exporter and will have to comply with the international treaties and laws of Iraq. The only other option is to enter into an agreement with a local supplier in that part of the world.	BAT/MJC	3/8/2011
44	Under what contract type will liquidated damages be enforced?	I.1, Contract Clauses Incorporated by Reference pg 49	The Government intends to award task orders on a fixed price basis wherever possible. It is anticipated that the Liquidated Damages clause would be applicable when fixed price labor hours are not delivered per the terms and conditions of the task order. However, the Government reserves all its rights under the clause.	CGR	2/24/2011
45	If Iraqi labor law changes over the contract period will the Government negotiate an equitable adjustment to the contract's fixed labor rates?	L.10.1.2.1, Labor pg 75	The contractor should bid according to the known laws and regulations. Should an adjustment be deemed necessary by the contractor, such request will be heard by the Contracting Officer and adjudicated at that time.	CGR	3/2/2011

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46	Please clarify the instruction to address procedures for "laundry services." PWS C.4.4.1 indicates laundry services are provided by another contractor.	L.10.3.1.2(1), Health Service Support Approach pg 89	Laundry services are provided by the basic life support contractor.	HHP	3/2/2011
47	The Contracting Officer for one of our past performance references has directed our company to send only one past performance questionnaire (i.e., not one to the lead contract person and one to a technical person, as stated in the RFP). Is our assumption correct that the Government will accept only one questionnaire for this particular reference?	L.10.3.1.5, Past Performance pg 93	L.10.3.1.5. does NOT direct you to send multiple past performance surveys to the same company. The proposal will describe no more than three relevant experiences that demonstrate the company's capabilities and strengths. In addition to the experience discussion in the proposal, the Offeror is to comply with the Past Performance Survey requirements. It is the Offeror's choice whether the surveys provide additional instances of relevant experience or whether they further support the experience discussion in the proposal.	CGR	2/22/2011
48	Please clarify the number of personnel who may attend the Oral Presentation. The RFP states that attendance "shall be limited to no more than five" and then states, "One representative from ... may additionally attend."	L.10.5.1, Oral Technical Proposal Presentation Constraints pg 95	The number of attendees is dependent on your business structure. In addition to the five slots allotted the prime contractor/offeror, "One representative from each proposed key subcontractor, associate contractor, and/or contract team member can additionally attend."	CGR	2/22/2011
49	Will US law govern any disputes with respect to contract performance in Iraq?	FAR 52.233-1 pg 51	A contract between a U.S. contractor and DoS to provide medical services in Iraq will be construed in accordance with U.S. laws and that U.S. standard of care would likely govern, but Iraq law may well apply to licensing, taxes, etc. Disputes under CDA can go to CBCA or to Court of Federal Claims at contractor's option.	CGR	2/22/2011
50	What is the venue for disputes? GSA Board of Contract Appeals, Court of Federal Claims, or what?	FAR 52.233-1 pg 51	Disputes under CDA can go to CBCA or to Court of Federal Claims at contractor's option.	CGR	2/22/2011
51	Amendment 0001 provided the Section B CLIN structure. In that structure, the quantity for the basic services is "LT" Lot. Suggest the quantity be changed to "MO" Month to allow services to be delivered on a monthly basis and allow the contractor to be fully paid for each month of service provided.	Section B Amd 001	"LT" will remain. The ODCs are NTE amounts. There is nothing to prevent full payment on a monthly basis.	CGR	2/22/2011

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	A COMMENT	B REFERENCE	C RESPONSE	D POC	E DATE
4	Suggest that the quantity for travel, ODCs and material be changed to "EA" Each. This will allow the contractor to bill for these items as provided during each month of performance.	Section B Amd 001	LT will remain. The ODCs are NTE amounts. There is nothing to prevent full payment on a monthly basis.	CGR	2/22/2011
52	The contract requires a warranty of services. What services are subject to warranty and how will the Government administer a warranty for health care services? Suggest removal of this clause.	FAR 52.246-20	No. The Contracting Officer's Representative (COR) is primarily responsible for quality assurance oversight of this services contract. (Note: the RFP has been amended to insert, "or the COR shall give written notice... within 30 days of detecting the defect."	CGR	2/28/2011
53	Is the May 20, 2011 start date in Amendment 1 inclusive of the transition period? What is the transition start date that we can use for pricing?	Section B and Section F.1	Transition will run from May 20, 2011 to September 1, 2011 for the Program Management task order (Task Order 001). For the remaining task orders, transition will be defined as task order award date until mission capable status, as defined in the task order RFP.	CGR	2/28/2011
54	Government provided the annual estimated Medical Equipment (ODC) cost of \$6,000,000 in the pricing tables. Is the contractor required to use the annual estimated Medical Equipment (ODC) cost of \$6,000,000 for each Task Orders?	2-11-2011_Pricing_Tables.xlsx, 1. Compliance Checklist, & 5. ID/IQ Pricing	No. Offeror is to propose ODCs that support his services delivery model.	CGR	2/22/2011
55	Is the contractor required to submit a separate Section B (Supplies or Services and Prices/Costs) for each Task Order and the ID/IQ proposal? In other words, is the Government expecting the contractor to submit six sets of Section B, one for each task order and then one for the ID/IQ?	2-11-2011_Final_from_GFMS.pdf, Sec B Supplies or Services and Prices/Costs, Sec B Supplies and Services, pp 3-7	No. Task Order proposals are to be in accordance with H.12 Ordering.	CGR	2/28/2011
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57	<p>In the Section B table, the unit is "LT" and the contractor is required to submit the quantities which the unit cost is \$250 or less in Line Item x003 and the quantities which the unit cost is \$250 or greater.</p> <p>Can we adjust the unit "LT" depending on the type of cost we are providing?</p>	Section L.10.1.2.2. pg 76	Yes, for purposes of the cost proposal. "LT" will remain for the ODC CLINs. ODCs over \$250.00 are NTE amounts.	CGR	2/28/2011

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58	<p>If the offeror is to submit a separate Section B for each task order, will the Government provide a Section B with a PoP to match the Task Order PoP or can the offeror adjust the dates in the Section B template. For reference:</p> <p>Attachment F: 2.2. Period of Performance. The period of performance will be one base year plus four (4) one-year option periods. Mission Capable Status will be October 1, 2011.</p> <p>Attachment G: 2.3. Period of Performance. The period of performance will be one base year plus four (4) one-year option periods. Mission Capable Status will be September 7, 2011.</p> <p>Attachment H: 2.3. Period of Performance. The period of performance will be one base year plus four (4) one-year option periods. Mission Capable Status will be September 15, 2011.</p> <p>Attachment I: 2.3. Period of Performance. The period of performance will be one base year plus four (4) one-year option periods. Mission Capable Status will be September 15, 2011.</p>	<p>2-11-2011_Final_from_GFMS.pdf and 2-11-2011_Pricing_Tables.xlsx, pp 3-7 & 1. Compliance Checklist #18</p>	<p>Offeror will propose task orders in accordance with H.12 Ordering.</p>	CGR	2/28/2011
59	<p>What is the evaluation criteria for the oral presentation?</p>	<p>Section M.5.1 para 1 and 2</p>	<p>The oral presentation supports the Offeror's overall proposal and should be structured to summarize and augment the written proposal. It will be evaluated in accordance with the technical factors in M.5.1. No cost/price data are to be presented. See L.10.5.5. for organization.</p>	CGR	2/28/2011

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60	Are all 5 Proposal Volumes to be delivered simultaneously on 3/30/11 by 17:00 PM?	Section L.6, para 1	Yes.	CGR	2/22/2011
61	Who will provide facilities' maintenance (i.e., repair roofs, repair flooring; electrical repairs, plumbing repairs, etc)? Does the contractor have to provide and budget for this maintenance or will another DoS contractor provide facilities' maintenance?	Section H.13	Facilities, and the maintenance thereof, are the responsibility of the Government.	CGR	2/22/2011
62	If the Government decides to leave existing Government equipment in place, then who will be responsible for replacing aged equipment? Will the Contractor, through a separate Task Order, have the opportunity to program for the retirement of aged equipment? Most capital equipment that the DoD might leave behind as GFE will be reaching the end of its life expectancy.	Section H.14	Equipment purchase, repair, maintenance, and replacement is an ODC. Costs are allocable at the task order level. There will not be a separate task order for GFE and/or CAP (contractor acquired property).	CGR	2/22/2011
63	Who will pay for the repair of costly medical equipment, e.g., X-ray, X-ray tubes, CT scanner, etc? Are there existing DoD maintenance contracts that can be transferred to the contractor for management through the expiration date?	Section H.14	Equipment purchase, repair, maintenance, and replacement is an ODC. Costs are allocable at the task order level. There will not be a separate task order for GFE and/or CAP (contractor acquired property). Currently, USF-1 has a parts and unlimited phone consultation contract with Phillips that will not carry over. The Offeror will be responsible for a subcontract with Phillips or another firm. We believe the Contractor's biomed tech will need training from Phillips or a firm with like capability.	MJC	2/23/2011
64	Do the existing operating rooms have HEPA filters or other types of air purification systems?	Section H.13	The operating rooms are not routinely equipped with HEPA or other filtration systems.	MJC	3/4/2011

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<p>4 This Government procurement does not clarify if the US Government will assist the contractor in clearing Iraqi Customs. The RFP suggests that the contractor is completely responsible for the clearance of medical material through Iraqi Customs and that the contractor must pay any tariffs and taxes that are levied. However, the answer to Question 86 in the Q&A document seems to indicate that, in fact, the US Government is prepared to help as long as the contractor follows the marking instructions provided. Request clarification.</p>	<p>Section H.9 and 2-11-2011_Response 11-2011_Response 10_Comments, #86</p>	<p>Follow the instructions. If the contractor fails to do so, the government is not responsible for providing assistance.</p>	<p>CGR</p>	<p>2/22/2011</p>
<p>65 The RFP suggests that the contractor should propose a Class VIII - Medical Supply Chain process. The RFP also suggests that the contractor can use the existing DoD Class VIII system as a back-up if needed. The answer "yes" to Question Number 59 in the Q&A document seems to indicate or imply that the contractor can, in fact, propose the use of the existing DoD system as the primary means of ordering and receiving medical supplies and that, if not available, then the contractor should have a system that they can propose and use. Is the Government's intent or preference that the contractor use the existing DoD system? It would be more cost effective if the contractor were allowed to establish accounts and buy all required medical supplies and pharmaceuticals through existing Government Prime Vendor relationships.</p>	<p>2-11-2011_Response 10_Comments and RFP_SACMMA11 R-0010, Section C.4.4, #59</p>	<p>The Offeror is to propose a supply chain that meets the requirements of the contract. The DoD system could be the fallback or it may be the primary system if the Offeror so chooses.</p>	<p>BAT/MJC</p>	<p>3/8/2011</p>
<p>66</p>				

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67	For these blood and blood products, will the Government also provide transportation support through the TOC?	Sections C.4.1.1 and C.4.4.6	The contractor will be responsible for procuring blood and blood products from Qatar; Transportation to Baghdad will be made available from Kuwait and Amman via Embassy supported flights. Within Iraq, Embassy Air Operations will support further movement.	MJC/BAT	2/28/2011
68	When is the subcontracting plan due, at contract start or as at proposal delivery?	Section H.8	Sec L. has been amended to clarify that the Small Business Plan will be due with the proposal.	CGR	2/28/2011
69	Will the Government be releasing a CDRL list during the proposal period?	NA	No.	CGR	2/22/2011
70	Can the Government provide details for the type of security that will be provided by the Department of State for contractor personnel security during in-country transportation, on and off embassy compounds and medical logistics?	2-11-2011_Response_to_Comments, #38 and 63	Security will be provided on site and between sites if travel is directed by the Government. No performance is foreseen outside of secure areas.	HHP	3/2/2011
71	Is the contractor allowed to add columns in the Pricing Table 4 to provide the detail of labor categories?	2-11-2011_Pricing_Tables.xlsx, 1. Compliance Checklist	See Attachment M, Pricing Instructions.	OJ	3/7/2011
72	On other contracts where the contractor is providing medical, laboratory, pharmaceutical and/or other ancillary health services, the Government has experienced significant savings by indemnifying the contractor against liabilities. Would the government consider indemnifying the contractor against any liability arising out of or related to the contractor's performance under this contract?	Section H	No.	CGR	2/22/2011

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73	Regarding any goods being held in warehousing and delivered, does the Freight forwarder delivering the goods require any special licenses to handle these goods? If so, please advise which Licenses so they can be obtained prior to award	C.4.4.1, pg. 14	No special licenses are understood to be necessary at this time. Changes may be expected and the COM will assist if material movement is coordinated with the COM.	HHP	3/2/2011
74	Under a DoS contract, goods are usually shipped "duty free." The RFP states:"The Contractor is responsible for any import fees, tariffs, and /or taxes imposed by Iraq as well as completion of all the cross border documentation required as part of this contract." Please confirm these goods will be shipped to Iraq duty free or if Iraq intends to impose taxes.	C.4.4.1, pg. 14	Yes, if shipped as directed by the Embassy and marked appropriately.	HHP	3/2/2011

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75	<p>"Any U.S. citizen prime or subcontractor employee who will deploy to Iraq in conjunction with this contract, regardless of purpose of visit or duration of stay, must have a favorable investigation, no older than 2 years, resulting in issuance of a Final Secret or Top Secret personnel security clearance from Defense Security Service (DSS) or must have a favorable Moderate Risk Public Trust (MRPT) investigation conducted by the Department of State, Bureau of Diplomatic Security. Only employees with current clearances or whose MRPT's are favorably adjudicated will be allowed to travel to Iraq." Based on the answers to questions from the Industry Day it was our understanding that there would not be a requirement for anyone under this contract to have a security clearance. If this has changed, is an interim SECRET level clearance sufficient for all personnel or will there be requirements for a TOP SECRET level clearance?</p>	H.1.2.1, pg. 33	Neither H.2. nor H.1.3. require a Top Secret or Secret clearance. This contract is at the MRPT level.	CGR	2/22/2011
76	<p>Is the contractor responsible for all pre-deployment processes and procedures through their own facilities or must they go through a Department of State sponsored CONUS Replacement Center or the Department of Defense CONUS Replacement Center or similar facility?</p>	H.7, pg. 37	It is envisioned that the Contractor's employees will process and travel independently. No reception center is deemed necessary.	HHP	3/2/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
77	"Any U.S. citizen prime or subcontractor employee who will deploy to Iraq in conjunction with this contract, regardless of purpose of visit or duration of stay, must have a favorable investigation, no older than 2 years, resulting in issuance of a Final Secret or Top Secret personnel security clearance from Defense Security Service (DSS) or must have a favorable Moderate Risk Public Trust (MRPT) investigation conducted by the Department of State, Bureau of Diplomatic Security. Only employees with current clearances or whose MRPT's are favorably adjudicated will be allowed to travel to Iraq." Will the Government accept non-US citizen Third Country Nationals as employees on this contract?	H.1.2.1, pg. 33	If they can be cleared and will be acceptable to the Government of Iraq.	HHP	3/2/2011
78	"In the event the Government requests the Contractor purchase Reimbursable Materials, the Contractor shall provide 2-3 competitive offeror quotes for all purchases exceeding US \$3,000 in support of the purchase, as well as a written justification if the Contractor selects other than the lowest priced quote. The quotes shall serve as a determination of fair and reasonable pricing by the Contracting Officer." Will the Government in fact require 2 to 3 competitive offers for Reimbursable Materials as long as the contractor obtained 2 to 3 competitive offers for the original materials and the reimbursable materials are ordered through the same vendor as approved for the original material?	Section B.3.1, pg. 8	In the absence of an ID/IQ delivery order contract or a BPA, negotiated at the time of the original order, the answer is yes.	CGR	2/28/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
79	<p>"Although this contract may require coordination with other contracts for performance of specific services, primary responsibility for performance of the following services will reside with other contracts and are not the responsibility of this contract: Medical Waste Disposal, Food and Water Point Inspection / Testing, Pest / Vector Control, Cafeteria Inspections."... "Other contracts will provide medical waste disposal, laundry services, equipment disposal, oxygen tank refills; trash collection; hazard material management and general housekeeping." Does the Government have a general list of other contractors who will be providing these services and can this list be provided?</p>	C.4.3; C.4.4.1, pg. 14	The Government does not have a consolidated list of local contractors supporting the Embassy.	CGR	2/22/2011
80	<p>The RFP states that 52.215-11, 52.215-13, 52.215-20, and 52.215-21 are incorporated within any resultant contract. The Contractor requests these be deleted as this is a competitive procurement and therefore not required. The RFP also states that 52.215-1 is incorporated within any resultant contract. However, pg. 70 of the RFP and pg. 85 solidifies that the Government anticipates this to be a competitive acquisition. Request that the Government remove this clause.</p>	I.1, pg. 49; L.1, pg. 70; L.10.1.2.5, pg. 85	No. The Government agrees that Certified Cost and Pricing Data are not required for the basic contract. However, on an action this large, there is a high probability that modifications and/or orders will exceed the threshold as specified in FAR 15.403-4.	CGR	2/28/2011
81	<p>The RFP includes an export clauses in I.3a. Does the Government consider a US-to-US (overseas) transaction exporting?</p>	I.3a, pg. 55	DOSAR 652.225-71 Section 8(a) of the Export Administration Act of 1979, as Amended (Aug 1999) will remain in the contract.	CGR	2/28/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
82	"The Contractor shall provide technically competent Health Care Providers (HCPs) that are "medically and dentally fit" in the time frame stated in the task order award notice." Will candidates be undergoing a Pre-Medical screening? Does the Pre-Medical screening include a drug test? If so, who will pay the cost and are the requirements similar to those deploying to the CRC at Ft. Benning, GA?	C.6.3, pg. 16	(We are not familiar with the CRC at Ft. Benning.) Contractor is responsible for providing personnel who are medically fit and able to perform their duties. If they are unable to perform due to drug impairment, either because they are not physically and mentally competent or because they are unable to receive and maintain an MRPT clearance, they will be found unacceptable.	CGR	2/22/2011
83	The RFP lists several different positions. Some of the positions are specific in their requirement for US certifications whereas other positions will allow for "equivalent". Please can you confirm if we can propose equivalents for all positions in our proposed staffing plan if we believe it will represent an effective solution?	Section C.6.6.1, pg. 19	The requirements are as stated in the RFP.	CGR	2/22/2011
84	"The Contractor shall have custody of remains until other arrangements can be made. Remains may be held for 24-48 hours." Is the contractor responsible for supplying "cold storage" for remains or will this provided by the mortuary services provider?	Section C.4.4.4, pg. 14	The Contractor will have custody of the remains up to 48 hours. The Contractor, not the mortuary services provider, will be responsible.	CGR	2/22/2011
85	"In the International Zone, contractors generally take care of their own personnel." Will Contractor personnel provided under this contract be authorized to use these medical services being provided under this contract or is the contractor expected to provide additional medical services to support contractor personnel operating under this contract?	C3.1.1, pg. 9	Contractor personnel are authorized to use the medical services being provided under this contract.	MJC/BAT	2/28/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
86	"The Contractor shall designate a medical director for appropriate medical oversight at each facility." Can the Contractor utilize one of its medical staff at the HU as the medical director or is this an additional position not currently listed within any of price lists provided?	C.3.2, pg. 10	The Offeror is to propose the staffing plan that best supports his services delivery model.	CGR	2/22/2011
87	"The Contractor shall be responsible for all supply chain management processes to support the operations of health care facilities. This includes determining what pharmaceuticals, medical supplies, and medical equipment are required to sustain patient care operations." Are these anticipated costs to be captured in the labor costs or within the ODC CLIN?	C.4.4.1	Supplies and equipment are ODCs.	CGR	2/22/2011
88	"The Contractor will provide computers, peripherals, and automation support required to meet the health care requirements described in this PWS." Are the costs for this equipment to be included in the labor pricing? If so, can the Government provide a more specific list of anticipated communication and automation support? (e.g. 1 computer per person?)	C.5, pg. 16	You have asked two questions: what equipment is needed and how do you propose it? You are to propose that equipment needed to support your services delivery model. Pricing will depend on your proposal strategy.	CGR	3/1/2011
89	"The Contractor shall be responsible for application, justification, fees, and certifications for any licenses required by the host government." Can the Government provide any estimates for these? Should we assume these should be included in the labor rates?	H.9	See L.11 Obtaining Licenses and Permits. Again, how you propose costs is determined by your proposal strategy.	CGR	3/1/2011
90	Table L.10.1.2 is inconsistent with Table 5. Does the Government prefer that we use Table 5?	L.10.1.2 (RFP); Table 4 & 5 (2-11-2011 Pricing Tables	Labor rate data are to entered into Table 5. The proposed fully loaded labor rates will go into the contract in Attachment A.	OJ	3/7/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
91	<p>"The Contractor shall propose the monthly estimates of consumable medical supplies and required medical equipment costs..."</p> <p>The Government states this reference above in Section B as well. This conflicts with Table 5 (2-11-2011 Pricing Tables) which provides a plug of \$6M per year for medical supplies and equipment. Should we use Table 5 or does the Government require that we estimate yearly ODC's?</p>	L.10.1.2.2, pg. 76	The \$6M figure is notional, to provide a comparable basis for price evaluation. See paragraph L.10.1.2.3. for revised instructions regarding estimated ODC requirements.		
92	<p>"Medical Evacuation from Iraq. The medical director at the DSHs will be responsible for making the determination that medical evacuation out of Iraq is necessary. Contract employees will be evacuated IAW the cognizant Contractor's standard operating procedures. For U.S. government direct hire employees the medical director will contact the Regional Medical Officer in Baghdad, who will make arrangements for the medical evacuation. For all other contractors, each contractor will hold private medical evacuation insurance. In all medical evacuation cases, the RSO will be involved in the evacuation coordination and decision process." Will the Contractor's personnel under this contract be included in the Government medevac or is the Contractor expected to provide its own medevac support for its personnel?</p>	C.4.1.1, pg. 13	The Contractor's personnel under this contract will be able to utilize Government medevac capabilities only within Iraq. Medevacs outside Iraq will be the responsibility of the Contractor and its medevac insurance company.	MJC/BAT	2/28/2011
93	Will the hospital facilities be equipped with gunpowder scanners?	N/A	No.	BAT	2/28/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
94	Is the Contractor awarded the contract permitted to charge a fee on ODC's?	N/A	Allowability of fee/profit will be determined at the task order level, depending on the contract type of the ODC and Labor CLINs. Fixed fee will be allowable on a cost-reimbursement CLIN provided the task order labor is fixed price. (See FAR 52.232-7.)	CGR	3/2/2011
95	Two different documents were released within the RFP dated 11 Feb, 2011 by the Government, one in Word and one as a PDF. Can the Government confirm that the correct RFP consists of the SF33 dated 11 Feb, 2011 and the Word document dated 9 Feb, 2011 is the latest Solicitation?	N/A	Amd 0001 is the corrected solicitation.	CGR	2/22/2011
96	Will the military have no residual support in Iraq to provide for service members? Evacuation of service members? And only until December 2011?	C.2, pgs. 8-9	USF-I will provide support, in some areas only, until the end of 2011. Where support is not available, active duty military will be deemed to fall under the DoS eligible population and will be supported by the Contractor. Beyond 12-2011, all military will fall under the Chief of Mission authority as applicable to eligibility.	MJC/BAT	2/28/2011
97	Which DSH's support which HU's? For instance is Erbil aligned with the Kirkuk or Mosul DSH? Tikrit?	Table C.1, pg. 9	There is no formal assignment of an HU to a DSH, though proximity will make that determination. Erbil HU will utilize Erbil local resources; Tikrit will be included in the Sather catchment area. A certain flexibility will be required depending on conditions at any point in time.	MJC	2/28/2011
98	There is an asterisk comment on the large DSH – explain the additional population of 5,000 and what impact this has on doctor/patient ratio?	Table C.1, pg. 9	The distinction is between primary health care facilities and second care. The Offeror will propose his service model to address patient care.	CGR	2/22/2011
99	How will military drawdown affect the population supported (including by site in Table C.1)?	C.3.1.1, pg. 9	Table C.1 is the post draw-down population.	CGR	2/22/2011
100	Please confirm that no contractors will be treated outside the IZ or Union III?	C.3.1.1, pg. 9	Please read C.3.1.1.	CGR	2/22/2011

SOURCE SELECTION SENSITIVE

4	A	B	C	D	E
	COMMENT	REFERENCE	RESPONSE	POC	DATE
101	HU's vary in size of population served and differ according to local threat level. How does this affect staffing, bed capacity, medical equipment, etc.?	C.3.2, pg. 10	The Offeror will propose resources required to support his medical services model.	CGR	2/22/2011
102	"Designate" a medical director? Should this be a medical provider or medical administrator?	C.3.2, pg. 10	The Offeror will propose resources required to support his medical services model.	CGR	2/22/2011
103	Will a military equivalency for physician's assistants, for example, be acceptable vice the credentials cited in this paragraph?	C.3.2, pg. 10	No; there is no equivalency.	MJC	2/28/2011
104	Does "formulary" refer to pharmaceuticals?	C.3.2, pg. 10	"Formulary" refers to the collection of pharmaceuticals.	MJC	2/28/2011
105	"Appropriate number of trauma bays..." On what basis?	C.3.3, pg. 11	The Offeror will propose resources required to support his medical services model.	CGR	2/22/2011
106	"Consulate and other locations..." How is this different than HU's? What impact will this have on minimum staffing levels? Supplies?	C.3.5, pg. 11	Each consulate or Embassy Branch Office will have a HU, which, when associated with a DSH, will be part of the DSH. Estimated staffing at a DSH include the HU functions. Facilities without a DSH will have a HU.	MJC	2/28/2011
107	Are contractor (provider) personnel entitled to prophylactic treatment (e.g. vaccinations)?	C.6.3, pg. 17	Personnel under this contract will receive whatever vaccinations the contractor wishes to provide - by the contractor.	MJC	2/28/2011
108	Classified reports – in conflict with previous Response to Comments.	D.1, pg. 21	No DD254 is required for this contract.	CGR	2/22/2011
109	QA Plan metrics: please explain second paragraph (bold). Contractor must offer metrics in its proposal; how then can the RFP be modified prior to award?	E.3, pg. 23	The Offeror's Quality Assurance Plan indicates the Offeror's approach to quality management. It is a subfactor for the Technical Evaluation. At the task order level, the Quality Assurance Surveillance Plan (QASP) is the government's tool for oversight and will, to the extent it is in the Government's best interest, incorporate the proposed metrics.	CGR	2/22/2011
110	Do non-US Citizen contractors have a lower investigation standard than US citizens?	H.1.2.2, pg. 34	No.	HHP	3/2/2011
111	Are CD's to be password protected or is this an optional requirement?	L.10 (Table), pg. 72	"may be password protected"--This is an optional requirement.	CGR	2/22/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
112	Medical Director position/title not identified in Task Orders. Is the public health oversight specialty equivalent to the medical director requirement in Section C?	All Task Orders	The Offeror will propose resources required to support his medical services model.	CGR	2/22/2011
113	Can the government clarify what the offeror should enter, if anything, in the Section B Line Item Summary for Unit price and Total Cost columns? Should it be the notional cost for all 11 locations or the total of the various TO Prices? Should this be bypassed for this submission as the data required by Section L.10 will be contained in the Excel sheets supplied?	Section B – Line Item Summary	No. Prices and estimated costs will be entered by the Contracting Officer prior to award.	OJ	3/7/2011
114	In section L.10.1.2.1 – Labor it states "The RFP states Labor shall include wages, fringe benefits, overhead, general and administrative and profit and shall be fully supported as indicated above." It is unclear what the reference to "fully supported as indicated above" means. Does the government require detail cost breakdowns of the labor rates even though this is a competitive procurement for fixed labor rates?	L.10.1.2.1	Yes. See amended pricing instructions.	OJ	3/7/2011

SOURCE SELCTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
115	Sections L.10.1.2.4 indicates that no G&A is authorized on DBA Insurance. If an offeror's disclosed Cost Accounting Practices include the allocation of G&A to DBA expenses why would they not be allowed to apply it on this contract? Cost accounting standards do not allow a contractor to allocate that unapplied G&A costs to other government contracts so it would mean that the offeror would take a direct loss on the allocated amount of G&A if he were not allowed to charge it through. There is no prohibition in FAR or CAS on this allocation.	L.10.1.2.4	L.10.1.2.4. has been amended. Applicable indirect costs are allowable on DBA.	OJ	3/7/2011
116	The pricing instructions are not clear relative to the requirements for the Task Order price submission. The tabs for the individual TOs in the Excel spreadsheet supplied with the RFP are blank. Should the offeror create a set of worksheets for each TO that outlines the labor and each group of ODCs and summarize separately from the IDIQ?	Excel Price Schedule; L.10.1	Pricing instructions have been amended. See attachments to task orders.	OJ/CGR	3/7/2011
117	Should the offeror be outlining the ODC costs for the entire 11 facilities at the IDIQ level or for each TO in its price proposal documentation?	L.10.1.2.2	No.	CGR	3/7/2011
118	The RFP prohibits the application of fee to ODCs. Is this intended to apply to a subcontractor teammate whose primary role is to supply materials and equipment as ODCs? They would have no ability to recover any profit unless they had a labor portion of the contract. Should they just be treated as supply vendors for purposes of the proposal?	L.10.1.2.2	Except for Contractor Teaming Arrangements, team members normally function as subs under the prime contractor. However, the Offeror should propose in accordance with his business structure.	CGR	3/7/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
119	It is unclear from the various documents and data received whether the government expects Danger and Hazard pay allowances to be included in the proposed fixed labor rates or whether they should be segregated and treated as ODCs. Since the ODCs are not part of the evaluated price it has a major impact on that price depending on how the offeror treats them in the proposal. Could the government please clarify how they expect danger and hardship pay allowances to be proposed?	L.10.1	Danger and Post Hardship Allowance should be entered under ODCs.	JO	3/7/2011
120	"The Contractor shall propose the monthly estimates of consumable medical supplies and required medical equipment costs..." The Government states this reference above in Section B as well. This conflicts with Table 5 (2-11-2011 Pricing Tables) which provides a plug of \$6M per year for medical supplies and equipment. Should we use Table 5 or does the Government require that we estimate yearly ODC's?	L.10.1.2.2, pg. 76	The \$6M figure is notional, to provide a comparable basis for price evaluation. See paragraph L.10.1.2.3. for revised instructions regarding estimated ODC requirements.	OJ/CGR	3/7/2011

SOURCE SELCTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
121	<p>"The Contractor will provide computers, peripherals, and automation support required to meet the health care requirements described in this PWS. Internet connectivity for the purposes of conducting work under this contract will be the responsibility of the Contractor. Anything that maintains patient data becomes the property of the Government. ... "The Contractor will provide a solution for transmission of CT and other digital images from other locations to the Sather-based radiologist for "real time" (emergency) readings and non-emergency readings. An example of one such solution already in use in Iraq by the Department of Defense is MEDWEB. The Contractor may consider, but is not required to use, this particular provider." Does the RFP refer to the Government data created or maintained in the system of record or the property itself? Does this mean the government will assume all property (computers, etc.) if they contain patient data? Or will the Offeror be able to wipe the data from the computer after they submit the data to the Government, in order to retain the asset? Please clarify. Is DOS Embassy providing communications equipment and or bandwidth?</p>	Section C. Descriptions/Specifications/Performance Work Statement and C.5 Medical Communications and Automation Support	Any PC connected to OpenNet has to be purchased by DoS and remains DoS property. The Contractor cannot connect a personal or corporately owned computer to OpenNet. This restriction also applies to computers with HIPAA (Health Insurance Portability and Accountability Act of 1996) covered data. Sec C. paragraph C.5.1. has been amended to clarify this requirement.	HHP	3/2/2011
122	<p>"Communication systems and equipment will be provided by the government" At the pre-proposal conference we were instructed to bring all IT/COMMs equipment. Please clarify</p>	C.4.4.2 Equipment	IT and communications equipment specific to the Department of State will be provided as GFE. The Contractor may provide equipment that they propose to provide better service to the Government. Please note the restrictions regarding connection of contractor equipment to the OpenNet.	HHP	3/2/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
123	<p>"Any U.S. citizen prime or subcontractor employee who will deploy to Iraq ..., must have a favorable investigation, no older than 2 years, resulting in issuance of a Final Secret or Top Secret personnel security clearance ... or must have a favorable Moderate Risk Public Trust (MRPT) investigation ... Only employees with current clearances or whose MRPT's are favorably adjudicated will be allowed to travel to Iraq. For those U.S. citizen prime or subcontractor employees who have been favorably investigated in the last two years and been granted clearances by DSS, the contractor Facility Security Officer will be required to certify employee investigative data to DoS, DS/IS/IND in the form of a Visit Authorization Request (VAR)... A copy of the JCAVS Person Summary must be attached to the VAR. ...MRPT investigation packages for uncleared employees must be submitted to DS/IS/IND at least 80 days prior to proposed deployment of each employee. ... Those employees will not be cleared for deployment until favorable results are obtained and eCC approval is received... " The Government indicated there is no requirement for a Facility Clearance. Please clarify how companies without a Facility Clearance have access to JPAS or can hold the required clearances. Please clarify if this is still a requirement for all employees working on this contract in Iraq.</p>	<p>TECHNICAL – Section H, Para H.1.2 Contractor Favorable Investigations; MSSI Questions/Comments, As of 8 February 2011: Response #53, #90, #109, #132</p>	<p>Contractors must comply with laws and regulations regarding facilities security clearances and corporate clearances.</p>	HHP	3/2/2011
124	<p>L.10 requires no less than size 11 font, Times New Roman (graphics excluded). Please can you provide the font requirement for graphics?</p>	L.10	There is no font requirement for graphics.	CGR	2/24/2011

SOURCE SELCTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
125	L.2 requires contractors to include the cost of site visits to all 11 facilities in the proposal, but Section L.10.1, Price Proposal, does not contain any location to include the pricing Where does the government want contractors to show the cost of site visits? Should the pricing be included in Section B as well	L.2 Site Visit	Site visits will be priced at the task order level. CLINs have been added to separately price transition costs.		
126	L.2 requires contractors to include the cost of site visits to all 11 facilities in the proposal, but Section L.10.1, Price Proposal, does not contain any location to include the pricing Where does the government want contractors to show the cost of site visits? Should the pricing be included in Section B as well?	L.2. Site Visit	This is a duplicate of the above question.	CGR	3/2/2011
127	Third bullet beginning with "Physicians and Primary Care Providers..." What is the criteria to be used by the RSO or other DOS official to consider candidate physicians and primary care providers licensed elsewhere (i.e., outside the US or Canada) for service in Iraq? Can DOS provide an applicable reference?	Credentialing- Section C, Paragraph C.6.4 Subparagraph	There is no accrediting organization for post-graduate medical education worldwide. Consideration of a physician licensed outside the US or Canada will include the ease and accuracy with which credentials and experience can be confirmed. In general, post-graduate training should be in a competitive program lasting from 3 to 5 or more years. Some examples can be found on the Foundation for Advancement of International Medical Education and Research (FAIMER) website under the Postgraduate Medical Education link. This is not intended to be a comprehensive listing.	MJC, BAT, KDM	3/2/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
128	Last paragraph, refers to resumes needing to include a clause about contingent hires and states "If resumes for key personnel that are not current employees are submitted, they need to include contingent hire letters." Staffing Plan, last paragraph, states "For key personnel who are not current employees, Offeror must include a contingency hire letter and evidence of permission for submission of resumes in connection with this proposal." Does this refer to Letters of Commitment from contingency hires? Please clarify whether this refers to Letters of Commitment. Also, we are assuming that Letters of Commitment should be included with resumes, but that they are not to be included as part of resumes. Please clarify.	Contingency Hire Letters, Section L.10.5.5.2; Section L.10.3.1.3.	L.10.3.1.3. does not address letters of commitment. L.10.5.5.2. clearly contained a clerical error. It has been edited to add the following: "If resumes for key personnel who are not current employees are submitted, include contingent hire letters."		
129	The cited clause does not contain the insurance minimums required under the contract. Will the government specify the minimum amount of insurance required?	Technical/Cost Citation: H.11 Personal Injury, Property Loss or Damage (Liability) Insurance	No.	CGR	2/24/2010
130	The cited clause does not contain the minimum malpractice insurance required. Will the government specify the minimum amount of malpractice insurance?	Topic: Technical/Cost, H.11.1. Medical Malpractice	The RFP has been amended to include the following: a) Malpractice Insurance—for non-surgeon doctors, nurse practitioners, and physicians assistants, \$1 million/ \$3 million (per occurrence/total).	BAT, MJC	2/23/2011
131	The cited clause requires a Small Business Subcontracting Plan (SBSP), but a SBSP is not included in the Section L proposal instructions. Please clarify where within the proposal the SBSP is required.	Citation: H.8 Department of State Subcontracting Goals	Sec L has been amended to include the requirement for submission of the Small Business Plan IAW FAR 52.219-9.	CGR	3/2/2011

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	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
132	Will the Government evaluate ODC and travel costs based on the Provisional Billing Rates or the Ceiling Indirect Cost Rates?	M.5.2.1.3 ODC and Travel Costs	Ceiling rates will be the basis of evaluation.	OJ	3/7/2011
133	Attachments G, H, I and J Paragraph 3.4.1 indicate pricing for a small DSH. Please clarify that Sather is to be priced as a Large DSH, Erbil and Union III as an HUs, and Basrah as a Small DSH.	Attachments G, H, I and J Paragraph 3.4.1	Attachments G, J., I, and J, Para. 3.4.1., have been corrected.	CGR	2/23/2011
134	Will contractor be responsible for a Next Of Kin (NOK) notification program for persons other than organic employees?	TECHNICAL – Section C, Para C.3.1 Concept of Medical Support Services	No; the contractor will be responsible for NOK notification only for its employees. Other contractors will have a similar obligation, and Direct Hire employees will fall under the Human Resources Office.	MJC/BAT	2/28/2011
135	"The Contractor shall perform... above the standard housekeeping... that meet the CDC guidelines..." Please provide a reference document and its location to ensure we understand those guidelines.	TECHNICAL – Section C, Para 3.4.4.5 Housekeeping	Refer to pertinent sections of Guideline for Disinfection and Sterilization in Healthcare Facilities, 2008 http://www.cdc.gov/hicpac/Disinfection_Sterilization/toc.htm	MJC/BAT	2/28/2011
136	F.4 of the RFP states that all items will be shipped directly to the U. S. Embassy without the contractor's name on the shipment. Response #118 states that all shipments will be shipped to Embassy and that "ITAR will not be required." For those items that are ITAR controlled, i.e., personal protection equipment, will DoS provide a license or an exemption prior to shipping to the Embassy?	TECHNICAL – Section F, Para F.4 Shipments; MSSl Questions/Comments, As of 8 February 2011: Response #118.	Yes.	HHP	3/2/2011
137	Who is the recipient of ISOPREP materials?	TECHNICAL – Section F, Para F.4 Shipments	Isolated Personnel Reports are a DoD requirement, not DoS. (We are unable to find a medical definition for "ISOPREP.")	CGR/BAT/MJC	2/28/2011
138	What specific government identification cards will be required and what is the process or forms required to obtain the cards?	TECHNICAL – Section H, Para H.1 Security	The Chief of Mission issues an Embassy Access Card that enables access to COM facilities. The RSO will provide a badge application to new arrivals to be used until a permanent badge is issued.	HHP	3/2/2011

SOURCE SELECTION SENSITIVE

	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
139	Is the list of countries who may not be assigned to perform on this contract complete in terms of the ability to hire TCNs under this contract? Please clarify that an amendment will be forthcoming that lists additional partner countries that will be allowed to provide services in Iraq. This information is required soon to enable the appropriate staffing and pricing to be completed prior to the 30 March submittal date.	COST – Section H, Para H.1.1. Assignment Restrictions	As the GOI indicates that other nationalities may perform in Iraq, amendments will be issued.	HHP	3/2/2011
140	Is there any requirement for clearance statuses and/or associated agencies in order to process employees through SPOT?	Section H, Para H.5 Synchronized Pre-Deployment and Operational Tracker (SPOT)	See FAR 52.225-19, in particular (e)(2). The SPOT process is handled by the Offeror's Facility Clearance Officer. Consult with that individual.	CGR	3/1/2011
141	Clause 52.225-19 (f) (3) from the RFP (PDF pg. 52) states that the contractor shall process through a reception center as designated by the Contracting Officer upon arrival at the place of performance. Where is the Reception Center designated by the KO?	TECHNICAL- Section I, Clause 52.225-19 (f) Processing and departure points (3) (pg.52 Final RFP)	The reception center will be dependent upon the geographical area in which the reporting employee is directed to report. The goal is to reduce to a minimum ground travel and predictable routing of incoming and departing staff.	HHP	3/2/2011
142	Section L 10.1.2.1 from the RFP conflicts with Section L 10.1.2.5 (h). Are the uplifts included in the base hourly rate?	COST – Section L, Para L.10.1.2.1 Labor and Para L.10.1.2.5 Pricing Spreadsheets, Item h)	We fail to see the conflict. Uplifts (if defined as Danger Pay and Post Hardship Differential) shall be allocated as an ODC or Material at the task order level.	OJ	3/7/2011

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4	COMMENT	REFERENCE	RESPONSE	POC	DATE
143	End of Service Completion Payments are typically paid to employees who satisfactorily complete a 1-year Foreign Service Agreement on a contract and is usually based on a percentage of the base salary earned. This is handled through our cost collection system the same as payroll is but is not paid to the employee until after the employee is off the contract. These are not an ODC, yet the formatted pricing sheet does not allow for the identification and display of these costs. How should these be presented in our cost proposal?	COST – Section L, Para L.10.1.2.5 Pricing Spreadsheets, Item h)	It depends on the accounting system of the offeror. If such costs are allocated indirectly, then they will be included in the fully loaded labor rates. Otherwise, they will be allocated as an ODC or Material at the task order level.	OJ	3/7/2011
144	This tab has the CLIN and Labor positions per the RFP listed in columns A and B. Note 4 on this Tab states “the proposed fixed fully loaded rate shall be for US citizens”. If a TCN/WCN nationality is being proposed instead of a US person, do we list this position and the same CLIN # under the heading “Proposed”? If positions are being proposed on Tab 4 “Fixed Rates” that are TCN/WCN nationality and are shown under the heading “Proposed”, they do not link over to Tab 5 – IDIQ Pricing. Is it the intent of DOS to have all these proposed positions priced on Tab 4 be displayed on Tab 5?	COST – File labeled: 2-11-2011 Pricing Tables, Tab 4. Fixed Rates	No, TCNs and WCNs will be proposed at the task order level. Table 5 intentionally reflects pricing for the RFP specified labor categories only.	OJ	3/7/2011

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	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
145	<p>Section L10.1.2.1 Labor states: The Offeror's cost proposal for Labor costs shall include the following: (1) The proposed labor categories; (2) Hourly rates for the labor categories and support for those rates, based on the contractor's accounting system; (3) Include base rates, all appropriate overheads, with explanation; location adjustments (Danger Pay, etc.); and profit; (4) Assumptions, including escalation rate. Are the proposed fixed fully-loaded hourly rates as required on excel file "2-11-2011 Pricing Tables" - Tab 4 "Fixed Rates" to include published Dept. of State uplifts (Post Differential Hardship / Danger) as part of the loaded hourly rate? Also, instructions on the "2-11-2011 Pricing Tables" Tabs (1. Compliance Checklist - Line 18 and 4. Fixed Rates - Note 6) conflict with Section L 10.1.2.1.</p>	<p>COST - File labeled: 2-11-2011 Pricing Tables, Tab 4. Fixed Rates</p>	<p>Uplifts will be proposed at the ODC or Materials level.</p>	<p>OJ</p>	<p>3/7/2011</p>
146					
147	<p>The RFP section C.4.4.2 states that communications systems and equipment will be provided by the government. Assuming that satellite broadband is provided, are cables in place and available for use by the contractor at all 11 sites, including connectivity from the satellite to buildings, between buildings, inside buildings, and data drops to contractor-provided desktop computers/medical equipment? If not, what portion of the cabling infrastructure is Government-provided and what portion must be contractor-provided?</p>	<p>Communications; RFP C.4.4.2</p>	<p>Infrastructure (basic) will be provided as the clinics are constructed, modified, upgraded, or occupied. If additional connectivity is required, COM will provide as soon as workforce is available to perform the work. Regarding bandwidth, the Contractor is responsible to contract and provide systems for special bandwidth requirements/applications. See C.5.</p>	<p>HHP</p>	<p>3/2/2011</p>

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4	A	B	C	D	E
	COMMENT	REFERENCE	RESPONSE	POC	DATE
148	Reference is made to OpenNet as available for communications. We are aware of the OpenNet initiative that monitors internet filtering. Is this the OpenNet referred to in Q&A #9?	Communications; Q&A #9	OpenNet is the Department of State unclassified IT network.	CGR	2/23/2011
149	Please confirm the contract title is "Health Service Support in Iraq" (Section B tables indicate "Baghdad Medical").	Sec A, pg 1	Confirmed.	CGR	2/23/2011
150	"Separate task orders for transition" will be issued. Please clarify whether a proposal will be required for each transition task order.	B.2, Type of Contract, pg7	We are unable to find this reference. However, the RFP has been modified to add Transition to Task Order 0001 Program Management.	CGR	3/2/2011
151	"...contractors generally take care of their own personnel." Is our assumption correct that the COM will provide the information regarding eligibility of contractor personnel (i.e., who is eligible)?	Concept of Medical Support and Services, pg 9	Yes.	CGR	2/23/2011
152	Please clarify the contractor's responsibility regarding providing medical care in response to medical emergencies. Is the contractor to provide medical support services without regard to eligibility during emergencies?	Concept of Medical Support and Services, pg9	While it is unlikely that the contractor will be in a position of providing services to individuals who are ineligible, life-saving and critical interventions will be offered regardless of known eligibility under such circumstances. The Chief of Mission or his or her representative may determine eligibility; immediately life-saving care needn't wait for that determination.	MJC/BAT	2/28/2011
153	Will the Government consider providing the FACT training at the contractor's established and well-provisioned training center?	C.6.5, Training and Certifications, pg 18	The RFP has been amended regarding FACT. (See H.15 and C.6.5.) The Contractor will be required to provide similar training for all American personnel going to Iraq. In coming to this decision, the DOS issued a sources sought solicitation, asking for firms that could provide similar training. The responses will be posted to the FedBizOpps site for this RFP. That posting is only to assist offerors. The firms listed are neither recommended nor endorsed, and the omission of any training vendor is not to be construed as a restriction against the use of that vendor.	CGR	3/2/2011

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	A	B	C	D	E
4	COMMENT	REFERENCE	RESPONSE	POC	DATE
154	Please define "recently" in reference to certifications and training completion.	C.6.6.2, General Surgical Officer, pg 19	Recently, for the purpose of this clarification, is within 5 years of the qualifying exam (with additional time permitted for active duty military service outside of the United States.)	MJC/BAT	2/28/2011
155	Considering the long-lead time associated with MRPT investigations and adjudications, will the Government accept interim MRPTs or interim Secret/Top Secret clearance?	H.1.2.1, pg 33	A permanent clearance or access is required.	HHP	3/2/2011
156	The requirement to submit MRPT investigation packages 80 days prior to deployment will require the offerors to get personnel commitments for all in-country positions before submission of the proposal. Please clarify whether the Government's intent is for all required personnel to be identified in the proposal.	H.1.2.1, pg 34	The Government's intent is not to require commitments before submission. The services provided under this contract are critical to the success of the diplomatic mission of the USG. Aggressive schedule compression and time saving is required to ensure award on schedule.	HHP	3/2/2011
157	Please confirm that the estimates for supplies and medical equipment are to be provided for all 11 sites in the Cost Proposal and that a comprehensive equipment list for the 11 sites is not required for the Technical Proposal (equipment lists are only required for Task Orders 001 – 005)	L.10.1.2.2, Section B Pricing, and Volume 3, pg 66	The RFP has been amended. First, the ODC lists are to be provided only for the initial task orders and will be included with the technical proposals. Second, the cost estimates for those lists will be included with the initial task order cost proposals, under separate cover from the technical proposals.	CGR	3/2/2011
158	Please clarify whether the reference to "charts, graphs, and foldouts" is intended to mean all graphics (e.g., photographs, drawings, tables, maps, sample forms,).	L.10., pg 72-73	In both the table and L.10, paragraph 4, the word "graphs" has been changed to "graphics."	CGR	2/23/2011
159	Is our assumption correct that "multiple trips per year for health care providers" applies to all personnel assigned in Iraq on this contract (e.g., Quality/Safety Officer)?	L.10.1.2.3, pg 76	The phrase "health care providers" has been changed to "contractor personnel."	CGR	2/23/2011

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4	A	B	C	D	E
	COMMENT	REFERENCE	RESPONSE	POC	DATE
160	Because the offerors are likely to have varying numbers of forms and reports, is our assumption correct that the "sample copies of forms and reports" are excluded from the page limitation?	L.10.3.1.2(6) Health Services Support Approach, pg 89	Yes, sample forms are considered graphics.	CGR	2/23/2011
161	"Each task order will have a Quality [Assurance] Surveillance Plan (QASP)." Will the Government be providing a QASP for each of the five task orders?	L.10.3.1.4.2.1, QASP, pg 90	Yes. The QASP is an essential part of contract oversight.	CGR	2/23/2011
162	The Transition Plan is described as a "top-level plan." Please clarify whether the offerors are to address the transition of each site individually, or if the specifics for each site's transition are included only in the Task Order Proposals (e.g., TO 001 – TO 005).	L.10.3.1.4.3, Transition Plan, pg 91	The Transition Plan should demonstrate an understanding of the arena plus management tools and processes to achieve rapid mobilization. It is a "top-level plan." Reference to the initial task orders (corrected to read, "Attachments F, G, H, I, and J") is there to emphasize the implementation schedule. It is not intended to request a site-specific level of planning.	CGR	2/23/2011
163	Please clarify whether the Government's intent is to have items 8, 9, and 10 addressed within each of the three citations, or as overall items addressed at the company level in our introduction to the past performance factor.	L.10.3.1.5, Past Performance, pg 94	"For <u>each</u> (emphasis added) of the past performance contracts and/or subcontracts, provide the following information... ." How the Offeror chooses to present the information is his choice.	CGR	2/23/2011
164	Is our assumption correct that the Government's intent was to state that Past Performance is equal in value to the "other four" technical factors (i.e., not "other three")?	M.5.1, Technical Evaluation Factors, pg 103	Yes. M.5.1. has been amended.	CGR	2/23/2011
165	Please clarify the following sentence ("and/or" implies offerors can discuss one of the three items, or the Government may only evaluate one): "The approach will be evaluated on the employment of industry best business practices, initiatives that will lower the cost of care provided, and/or provide a rapid surge capability in the event of an increases [sic] in demand."	M.5.1.1.2, Health Service Support Approach, pg 104; Att. F through Att. J, pp 117, 121, 124, 128, 132	The RFP has been amended; "and/or" has been changed to read, "and."	CGR	2/23/2011

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4	A	B	C	D	E
	COMMENT	REFERENCE	RESPONSE	POC	DATE
166	Please confirm that the Government's intent is for offerors to submit a total of 12 binders for each of the five Task Order Proposals. The total number of binders each offeror would be submitting is 84. Would the Government change the requirement to have all task order Technical Proposals in a single binder and task order Price Proposals in a single binder? The total number of binders would be reduced to 30.	Att. F through Att. J, pp 117, 121, 124, 128, 132	No, it was not the Government's intent to require 84 binders. The language has been clarified, both in L.10 and in the attachments.	CGR	3/2/2011
167	Is our assumption correct that the Task Order Proposals will use the same B tables as provided for the overall proposal?	Att. F through Att. J, pp 117, 121, 124, 128, 132	No. Please propose in accordance with the Ordering provision, H.12.	CGR	3/2/2011
168	Please confirm that past performance questionnaires are not required for the Task Order Proposals (they are listed as not part of the page count).	Att. L, pg 139	Confirmed. Task Order RFPs have been amended to delete the reference to past performance questionnaires.	CGR	2/24/2011
169	There are two different versions of the solicitation posted on FedBizOpps. One is a Word document and the other is a pdf document. Please direct us to the correct version. Note: the Word version does not have the SF 33 nor the B tables (they are in the pdf version). The pdf version has no attachments and multiple text differences when compared with the Word version	Two Versions of the RFP	See Amd. 001.	CGR	2/24/2011
170	The Excel Pricing Tables spreadsheet has 10 tabs – tabs 6 through 10 are blank (the five task orders).	Excel Pricing Tables, Tabs 6-10	Tables 6-10 have been removed. Task order pricing instructions have been appended to the task order RFPs.	OJ/CGR	3/7/2011